

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>	<i>71534</i>	<i>02-19-89</i>
O.P.E. CLASSIFIER			
FORMALITY REVIEW		<i>60821</i>	<i>7/19</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Best Copy

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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9	✓	✓	
10	✓	✓	
11	✓	✓	
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Claim	Final	Original	Date
51	✓	✓	
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Claim	Final	Original	Date
101	✓	✓	
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148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions
staple additional sheet here

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